

REPRINTED FROM

UNIVERSITY MEDICAL MAGAZINE

EDITED UNDER THE AUSPICES OF THE ALUMNI AND FACULTY OF MEDICINE
OF THE UNIVERSITY OF PENNSYLVANIA

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VOL. IX.

MAY, 1897.

CONTENTS.

Original Articles.

Remarks on a Case of Acute Yellow Atrophy of the Heart, and Anesthesia. By F. M. DeGraw.	107
An Analysis of the Results of the First Care of Medicine with Reference to the Frequency of Occurrence, and the Efficiency of Treatment. By Dr. J. M. Atkinson, M.D., LL.D.	117
Obesity. History of a Series of Operative Procedures for the Control of Obesity. By Charles A. Oberle, A.M., M.D.	127
The Treatment of Epilepsy. By Edward D. Smith, M.D.	137
The Diagnosis and Treatment of Cardiac Hydrocephalus. By J. Bruce Smith, M.D.	139

Medical Progress.

Medicine	109
Surgery	110
Gynecology	111
Pneumology	112

Editorial Notices.

Opinions Interposed in Typographical Fehler.	113
The Semi-Annual Meeting of the American Medical Association.	113
Books Received.	114

Bulletin Notices.

Annual of the University of Pennsylvania and Associated Institutions.	115
The American Year-Book of Medicine and Surgery, Edited by Charles E. Stimpson, M.D.	116
A Year-Book of Medical Periodicals, Assisted by Ernest D. Nichols, M.D.	116
Diagnosis, Treatment and Prevention of Disease, by Henry W. Corbin, M.A., M.D.	117
A Manual of Bedding.	117

A Manual of Bedding.	117
A Complete Compendium in General Medicine and Gynaecology.	118
By E. B. Smith, M.D.	118
and others.	118

Editorial.

Some Recent Suggestions on the Treatment of Epilepsy.

JULY, 1899

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THE HISTORY OF MEDICINE.¹

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Morbid Anatomy and Pathological Histology, University
of Pennsylvania.

GENTLEMEN,—While casting about for a suitable theme on which to address you this evening, the thought came to my mind that the members of the Stillé Medical Society, since they had heard me so often on purely medical subjects, might prefer it if, on this special occasion, I should select something not strictly pertaining to morbid processes. For this reason I have chosen a subject which, although it comes within the pale of medicine, does not bear directly on its practical side, —a subject of the deepest interest,—viz., the history of medicine.

It is not my purpose, were I able and were the impossible feasible, to sketch in the time that I may with propriety consume the rise and development of medicine from its remote beginnings, at the dawn of history, to this day of wonderful progress, to this era of antitoxins and fearless surgery. I want rather to point out, if I can, the value of a study of the history of medicine, its importance, and its ineffable charm, and to arouse in you, my hearers, a longing for historic knowledge, a love for medical traditions, and a hero-worship for the dead masters of our scientific art.

Viewed from all possible stand-points, history, it seems to me, is the most interesting of all mental pursuits; for it reveals to us, if properly interpreted, the intellectual development of the human race. It is the counterpart of the study of biology and paleontology. These sciences teach us the morphologic development of man; they reveal to us the form-phases through which he has passed to reach his present corporeal state. Now, history does the same for the intellect. It lays before us the thought-phases which the human mind has traversed from its unthinking infancy to its present state of lofty mental vigor and broad culture.

History, be it remembered, is not merely a recital of facts and an arraying of dates; it is much more. It is philosophy; as some one has said, "History is philosophy teaching by example." If historic study—general historic study—is necessary for the fuller understanding

¹ An address delivered before the Stillé Medical Society.

of the thoughts, the actions, the aspirations of man in the past, and of contemporary man, it follows inevitably that, in order to comprehend any branch of intellectual endeavor, the history of that branch must be known. This is true of the arts and the sciences. Men often satisfy themselves with the present; but the present is not seen rightly unless it is illuminated by the past. He is not the ideal scientist who fails in his appreciation of the labors of his near and remote predecessors.

I can conceive the pleasure derivable from the study of mathematics, and can understand the devotional enthusiasm of one engaged in solving the profoundest problems of astrophysics; but only when, with such deep insight, there is joined in the mathematician's mind a knowledge of the history of his science—when he is conscious of the invaluable labors of Euclid, of Copernicus, of Kepler, of Newton, without which his own triumphs would have been impossible—does he reach the highest acme of scientific attainments.

Goethe has said, "The history of a science is the science itself." This is true, in a large measure, of medicine; but we, leading, both as students and as practitioners, a life of intensest activity, are apt to forget, or to overlook, the debt of gratitude we owe to our predecessors; a debt that reaches back to the very earliest struggles of the healing art. We have a right, as members of the most progressive of all professions, to feel proud of the achievements of medical science in this age; but we owe it to ourselves to give credit for the noble work of those who preceded us and prepared the way. In this respect, we are far behind our colleagues of the other professions, who treasure and cherish the names of the leaders gone before. In the law, the relation of the present to the past is more clearly emphasized, and a lawyer who loves his profession knows not only the statutes and decisions in force to-day, but their mode of origin, how they arose, and how they became crystallized. And yet, the history of law cannot compare, in intensity of interest, in power of fascination, with that of medicine. The history of medicine is, to a large extent, the history of civilization; the medical opinions in every age were colored by the culture of that age and bear its signature. Medicine is not something esoteric, something not under the influence of the shaping forces that control the progress of mankind in other directions; just like social and economic conditions, it is under the sway of that omnipotent force, evolution. The medicine of to-day could not be what it is, nor would the medicine of the future be what we are sure it will be, without the mental travail of our predecessors from the earliest time and our own work, which is only a link in the chain.

Take the circulation of the blood. We talk of it glibly as a self-evident truth, and are unmindful of the fact that we did not discover

it, but that it was made known to the world by the immortal Harvey, who toiled and labored in giving birth to this discovery, perhaps the grandest ever made by man. Is it not our duty to know something of the history of this discovery? Have not the laity a right to reproach us if we do not cherish the memory of Harvey, of Boerhaave, of Hunter, of Jenner, of Vesalius, of Morgagni, the heroes of medicine?

But apart from the charm, apart from the question of duty, the study of history has still another basis. It guards against error. The past of medicine, like the past of other sciences, has its dark as well as its bright side. Error has often been rampant, dying but slowly before the onslaught of truth. But it is curious that errors are apt to be revived and hailed as new truths, and sometimes perturb the mind, not of the laity alone, but even of the physician.

A knowledge of the history of the past guards us against a hasty espousal of a fallacy which those who preceded us had buried in the dust. Remedies are vaunted as new and efficient that were long ago discarded. On the other hand, an historic knowledge may make us accept something more readily than would be the case in the absence of such knowledge. Take bleeding, for example: For many years bleeding has been in disrepute, and physicians still shrink from employing it, because of the harm that was done with it in the last century and the early part of this one. But if it is known that it was not bleeding itself, but the indiscriminate and excessive use of it, that cost so many lives, then we shall not hesitate to resort to it whenever our more enlightened knowledge recognizes a clear indication.

But historic knowledge has another value of transcendent importance, far above the practical one just indicated; it endows its possessor with that rarest of all attributes, the critical faculty. No one who is ignorant of the truths and fallacies of the past, of the multitudinous changes through which medical opinion on any one subject has passed, can judge of the truth or permanency of the thought and theories of his day. Without the critical faculty, we can form no trustworthy independent judgment, but are swayed by every new argument, and believe always the last thing we read or hear. You will be astonished as you grow older to find how feebly some men in medicine hold their opinions, if they have any at all. This is not because of the harboring of a scientific spirit which is open to conviction, but is due to a lack of grasp, of judgment, dependent upon the absence of historic knowledge. We all marvel at the high state of medical science in Germany, and willingly yield to the Germans the palm of pre-eminence. One reason for this, I am convinced, is that the German is not content to know the thought of his time, but makes himself familiar with that of the past to a degree nowhere equalled.

When he writes an article, he searches the literature as far back as he can for data bearing on his subject, discriminates and judges between the false and the true, and, by induction and deduction, formulates his own mature views and clings to them and defends them with a zeal and a pertinacity, a pugnaciousness, I may add, that is refreshing and stimulating. From an article in the January *Forum*, by Professor Eucken, I quote the following:

"Prominent Americans have frequently told me that they regard as the most striking characteristic of contemporaneous German science the tendency to treat all subjects historically and critically; to state carefully the origin of every problem, and trace it through every phase of its development to the present day. Even experiments in physics, they say, are not performed without an historic introduction."

I want to urge you, in this connection, to make it a practice in your future work, whenever you write an important article, to look up all the relevant literature, without which your essay will not be complete. A knowledge of the literature may also guard you against committing mistakes. We, in this country, are less often neglectful in this respect than are our English cousins. J. Greig Smith, a noted English gynecologist, recently deceased, in 1893 spoke thus: "The man who writes on his own experience and knowledge, writes on a poor and narrow and shifty foundation. In science, he is to be found only in medicine; and in scientific medicine, he bears the prefix, in all its significations,—British."

As undergraduates, you have not much time for anything but your text-books; and yet, I hope to see the day when medical students in the higher classes will go to the libraries and read the current journals and books, as well as history and the medical classics. Few of us know that there are classics in medicine; yet our literature is rich in master works. Medicine has not one but many Blackstones. To read the works of Sydenham, Addison, Bright, Troussseau, Laennec, Traube, Niemeyer, Cohnheim, and others, is not time wasted.

If I were to outline a course of reading; I should recommend, first, the perusal of a short work on the history of medicine, as that of Roswell Park or Julius Pagel, that could be read during the junior or senior year. Whenever a name is mentioned by your lecturer or in your text-books, such as Graves, Basedow, Velpeau, Hunter, Sylvius, Winslow, Scarpa, Charcot, refer to the history and read the biography of the man, and, if possible, go to the library and see his works, and handle them. How delightful the study of medicine would then become! Secondly, in medical societies, such as the one to which you and I have the great honor to belong, it might be a wise custom to assign to members in succession the preparation of brief biographies

of distinguished men of medicine, and by careful choice in this direction the student could learn a great deal of history during his undergraduate life, and acquire a taste for the fascinating study. At times the plan might be varied, and, instead of a biography, it might be advisable to have a member epitomize the history of an important disease. Thus, the subject of exophthalmic goitre, of aneurism, etc., might be looked up from the historic point of view,—not a difficult matter, if the student knows how to consult a library. Another very instructive feature would be the reading of the first classical description of a disease; for instance, the reading of Addison's paper on the constitutional and local effects of disease of the suprarenal capsules, of Raynaud's, on symmetric gangrene, of extracts from Bright's papers on renal disease, etc.

I hope I have not wearied you with my appeals. I am sure that medicine, interesting and absorbing as it is, can be made much more so, can be rendered a source of unfailing satisfaction, if, in your daily work as students and as practitioners, wherever the fates may cause you to plant your standard, you will keep in touch with the glorious past of our noble and incomparable calling.

